PTO/SB/51 (07-03)

Approved for use through 01/31/2004. OMB 0651-0033

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REI	SSUE APPLICATION DECLARATION BY THE IN	VENTOR	Docket Number (Optional) KC001.RE
hei Eac I bel	reby declare that: h inventor's residence, mailing address and citizenship a lieve the inventors named below to be the original and firstent number 6.286,240 gransue patent is sought on the invention entitled SAFETY	re stated below st inventor(s) of	the subject matter which is described and claimed
the :	specification of which	······································	,
Ø€	is attached hereto.		
	was filed on as reissue	application num	ber
	and was amended on(If applicable)		
ame I aci	ve reviewed and understand the contents of the above-icendment referred to above. knowledge the duty to disclose information which is mate	rial to patentabil	lity as defined in 37 CFR 1.56.
	I hereby claim foreign priority benefits under 35 U.S.C. 1 equivalent) listing the foreign applications.	19(a)-(d) or (f),	or 365(b). Attached is form PTO/SB/02B (or
	rily believe the original patent to be wholly or partly inope ow. (Check all boxes that apply.)	rative or invalid,	for the reasons described
	by reason of a defective specification or drawing.		
A	by reason of the patentee claiming more or less than he	had the right to	claim in the patent.
	by reason of other errors.		
At le	east one error upon which reissue is based is described but the name as to the name as	pelow. If the reise ature of the broa	sue is a broadening dening:
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[Page 1 of 2]
This collection of information is required by 37 CFR 1.175. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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(REISSUE APPLICATION DECLARATION BY THE INVENTO

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Note: To appoint a pow	gr of attorney, use form PTO/SB/81.				
Correspondence Addres	ss: Direct of communications about the applic	ation to:			
Customer Number:					
OR .					
Firm or Individual Name	Alfred F. Hoyte, Jr.				
Address	733 15th Street, N.W.			·	
Address	Suite 700				
City	Washington	State	DC	Zip	20005
Country					
Telephone		Fax	}		
and belief are believe	il statements made herein of my own knowled d to be true; and further that these staten so made are punishable by fine and imprison jeopardize the validity of the application, a	nent, or bo	made with the th, under 18 U.S	e knowledge ' S.C. 1001, and	that willful talse I that such willful
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0 Pull name of second joint inventor (given name, family name) Inventor's signature Date Citizenship Residence Mailing Address Full name of third joint inventor (given name, family name) Date Inventor's signature Citizenship Residence Mailing Address

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Additional joint inventors or legal representative(a) sub named on separately numbered sharts forms PYO/SB/02A or 02UR attached hyratic.

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